U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 7765	2. Fiscal Year Covered From:
Manage Procured to interest in a contract of the contract of t	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Blain Daugherty	Name Laborers' International Union of North America
	Labor Organization File Number 000-131
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 5984 Wilson Mills	Street 905 16th Street Northwest
City Highland Heights	City Washington
State Ohio ZIP Code + 4 44143	State District of Columbia ZIP Code + 4 20006
5. Position in labor organization. International Representative	
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu	se or minor child directly or indirectly had any of the following interests sions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or or monetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
P.O. Box, Bldg., Room No., if any Street	7.b. Amount.
Control American (Control American)	7.b. Amount.
Street Street	7.b. Amount.
Street City The Street	
Street  City  State  ZIP Code + 4	Perjury and other applicable penalties of the law, that all of the information and documents) has been examined by the signatory and is, to the best of the
Street  City  State  ZIP Code + 4  Signature and verification. The undersigned declares, under penalty of F submitted in this report (including the information contained in any accompany)	Perjury and other applicable penalties of the law, that all of the information and documents) has been examined by the signatory and is, to the best of the

Name of Person Filing Blain Daugherty		File Number U-
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actifulation (2) any part of which consists of buying from or selling or leasing directly or included ling with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise	
Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OVSS Laborers-Employers Coop. and Edu Trust  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suit 305  Street 25 Century Blvd.  City Nashville  State Tennessee ZIP Code +4 37214	a. Labor Organizat b. Trust c. Employer	ion
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	Cooperation and Edu projects and jobs, share, advertises t	athern States Laborers-Employers location Trust (OVSS LECET) secures increases union-sector market thier services, develops a linces shared market-related  e of such dealing.  or income received.
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	*
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Filing	Blain	Daugherty
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# Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OVSS Laborers-Employers Coop. and Edu Trust	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Suite 305	b. Trust	
Street 25 Century Blvd.	c. Employer	
City Nashville		
State Tennessee ZIP Code + 4 37214		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Ohio Valley and Southern States La Cooperation and Education Trust (C	OVSS LECET)
Trade Name, if any:	secures projects and jobs, increas market share, advertises thier ser	rvices, develops a
P.O. Box, Bldg., Room No., if any	workforce, and advances shared mar interests.	ket-related:
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	endinals septemblishinis en
	1/18/2004- meals, lodging and expeattending conference.	nses while
	12.b. Amount.	6703
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Name of Person Filing	Blain	Daugherty
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## Part B Continuation Page

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8. Name and address of Business (including trade name, if any).  Name OVSS Laborers-Employers Coop. and Edu. Trust  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 305  Street 25 Century Blvd.  City Nashville  State Tennessee ZIP Code + 4 37214	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	- Innie
Name  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  ZIP Code + 4	Ohio Valley and Southern States La Cooperation and Education Trust (Cosecures projects and jobs, increas market share, advertises thier ser workforce, and advances shared mar interests.	VSS LECET) es union-sector vices, develops a
Color of the second control of the second color of the second colo	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	2/6/2004 - Meal provided at meeting	
	12.b. Amount.	\$35

Name of Person Filing Blain Daugherty	File Number <b>U-</b>

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OVSS Laborers-Employers Coop. and Edu. Trust	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Suite 305	b. Trust	
Street 25 Century Blvd.	c. Employer	
City Nashville		
State Tennessee ZIP Code + 4 37214		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Ohio Valley and Southern States La Cooperation and Education Trust (O	
Trade Name, if any:	secures projects and jobs, increas market share, advertises thier ser	es union-sector
P.O. Box, Bldg., Room No., if any	workforce, and advances shared mar	
Street		
City   The state of the state o		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	00/10/20/04/10/20/04/10/20/04/10/10/10/10/10/10/10/10/10/10/10/10/10/
	5/20/2004- Meals provided while at	tending meetings.
	12.b. Amount.	\$59

Name of Person Filing	Blain	Daugherty
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# Part B Continuation Page

	9. Business deals with:	
Name and address of Business (including trade name, if any).	9. Dusiliess deals with:	
Name OVSS Laborers-Employers Coop. and Edu. Trust	a. Labor Organization	
Trade Name, if any:	a zaso. o gamzaton	
P.O. Box, Bldg., Room No., if any Suite 305	b. Trust	
	c. Employer	
Street 25 Century Blvd.		
City Nashville		
State Tennessee ZIP Code + 4 37214		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Ohio Valley and Southern States Labo: Cooperation and Education Trust (OVS:	
Trade Name, if any:	secures projects and jobs, increases	union-sector
Agrandador de la companya del companya del companya de la companya	market share, advertises thier service workforce, and advances shared market	
P.O. Box, Bldg., Room No., if any	interests.	
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	7/15/2004- Meal provided while attend	ding meeting.
	12.b. Amount.	\$62

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Name of Ferson Filling	Blain	Daughertv

# Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OVSS Laborers-Employers Coop. and Edu. Trust	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any Suite 305	b. Trust	
Street 25 Century Blvd.	c. Employer	
City Nashville		
State Tennessee ZIP Code + 4 37214		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Ohio Valley and Southern States La Cooperation and Education Trust (C	
Trade Name, if any:	secures projects and jobs, increas market share, advertises thier ser	ses union-sector vices, develops a
P.O. Box, Bldg., Room No., if any	workforce, and advances shared mar interests.	ket-related
Street		
City (Experience of the Company of t		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	11/29/2004- Meal provided at a resattending a conference.	taurant while
	A DE REPORTE DE LA COMPANIA SE ESTADA DE LA COMPANIA DE	
	12.b. Amount.	\$72

Name of Person Filing	Blain	Daugherty
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#### Part B Continuation Page

	9. Business deals with:	
Name and address of Business (including trade name, if any).	3. Dusiness deals with.	
Name Laborers-Employers Cooperation and Ed. Trust	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
	c. Employer	
Street 905 16th Street, Northwest	C. Limployer	
City Washington		
State District of Columbia ZIP Code + 4 37214		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Laborers-Employers Cooperation and (LECET) secures projects and jobs,	
Trade Name, if any:	sector market share, advertises th	eir services,
Trade (valie, ii arry.	develops a workforce, and advances related interests	shared market-
P.O. Box, Bldg., Room No., if any		
Street		
City		
Experience of the control of the con		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	Meal served at reception.	
		-
	12.b. Amount.	\$104

Name of Person Filing Blain Daugherty		File Number <b>U-</b>	
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Boyd Watterson Asset Management, LLC	a. Labor Organization	
Trade Name, if any:	distribution of gameanon	
P.O. Box, Bldg., Room No., if any Suite 1400	b. Trust	
Street 1801 East 9th Street	c. Employer	
City Cleveland		
State Ohio ZIP Code + 4 44114-3179		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	100000000000000000000000000000000000000
Name OH Laborers DC-OH Contract. Assoc. Ins. Fund	Provides financial services.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 905 16th Street, Northwest		
City Washington		
State District of Columbia ZIP Code + 4 20006	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	01/18/2004 Meal while attending meeting.	
	12.b. Amount.	\$28

Name of Person Filing Blain Daugherty	File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Boyd Watterson Asset Management, LLC	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any Suite 1400	b. Trust	
Street 1801 East 9th Street	c. Employer	
City Cleveland		
State Ohio ZIP Code + 4 44114-3179		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name OH Laborers DC-OH Contract. Assoc. Ins. Fund	Provides financial services.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 905 16th Street, Northwest		
San Total Street, Nothings, and the san the sa		
City Washington		
State District of Columbia ZIP Code + 4 20006	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	01/19/04 Meal while attending meeting.	
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	12.b. Amount.	\$37

Name of Person Filing Blain Daugherty	 File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Boyd Watterson Asset Management, LLC	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Suite 1400	b. Trust	
Street 1801 East 9th Street	c. Employer	
City Cleveland		
State Ohio ZIP Code + 4 44114-3170		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name OH Laborers DC-OH Contract. Assoc. Ins. Fund	Provides financial services.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 905 16th Street, Northwest		
Clty Washington		
State District of Columbia ZIP Code + 4 20006	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	**************************************
	03/29/2004	
	Meal while attending meeting.	
	12.b. Amount.	\$112

## ADDENDUM PAGE 1 of 1.

Blain Daugherty	
File Number U	
Reporting Period: 1/1/2004 through	12/31/2004

# ADDENDUM A [UNSOLICITED GIFTS OR PROMOTIONAL ITEMS]

On several occasions in 2004, I recall that I was given [a] complimentary promotional item[s], such as a [clothing item, accessory or printed material with LIUNA logo, etc.]. At no time did I solicit such item[s] and they were sent to my office without my prior knowledge or authorization. I did not retain possession of any of these items nor did any member of my family. I have no knowledge as to the value of the item[s], and do not recall the manufacturer or provider of such [an] item[s].

# ADDENDUM B [MEALS/EVENTS WITH FRIENDS]

I have personal friendships with individuals who may be employed by reportable entities under the LMRDA, which exits separate and apart from my role as a union officer/employee. In 2004, it is conceivable that I received the benefit of a meal, refreshment or social event from these individuals, which I did not report because I do not have any records of these personal encounters and/or have no specific recollection of any benefits received.

# ADDENDUM C [MEAL/EVENTS WITHOUT SPECIFIC RECORDS OR RECOLLECTION]

It is conceivable that I received the benefit of a meal, refreshment or social event from an individual who may be employed by a reportable entity under the Labor Management Reporting and Disclosure Act, which I did not report because I do not have any records of these encounters and have no specific recollection of any benefits received.

## ADDENDUM D [UNION TO UNION BENEFITS]

I am not reporting any benefits that I may have received in 2004 from labor organizations affiliated with the Laborers' International Union of North America ("LIUNA"), my employer, or other labor organizations. My understanding of guidance received by the AFL-CIO from the Department of Labor is that benefits received from LIUNA-affiliated labor organizations and other labor organizations are not reportable on the LM-30 report, and I am following that guidance.



# August 12, 2005

U.S. Department of Labor Employee Standards Administration Office of Labor-Management Standards 200 Constitution Avenue, NW Room N- 5616 Washington, D.C. 20210

Re: Form LM-30 Filing for Blain Daugherty., Labor Organization File # U-

Dear Sir or Madam:

Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further, the Department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record nor any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Sincerely,

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